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TEACHING PROBLEMS OF PUBLIC HEALTH INSTRUCTORS<sup>1</sup>

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Of all the problems confronting public health instructors just now one problem is of prime importance. I wish to discuss it this morning, passing over, though with regret, other more technical ones that I had intended, until a few days ago, to bring forward at this time.

Every thoughtful woman in public health work sees on the one hand enormous need of the work that nurses can do, not only to save life but to increase the physical efficiency of the nation; on the other hand, she sees the totally inadequate number of nurses already trained for public health nursing, the prospect of greatly increased need in the future, and the possibility of greatly decreased numbers of women preparing to meet it. Today each one of us is asking herself the same question: How can I with my experience and ability serve most effectively in this crisis that we as a nation are passing through? And I am convinced that we who are teachers of public health nurses can at least for the present serve best by training the greatest possible number of nurses for the work of health conservation. This is a teaching problem clearly, because without students we cannot teach. I will try to show just why I consider public health nursing a patriotic service, just why it is a national need, and just why I feel that our greatest problem is to obtain greatly increased numbers of nurses for our training courses in New York, Philadelphia, Cleveland, Chicago, Boston, and elsewhere.

We have come a long way since the time when victory was believed to depend only on those actually fighting on the battle field. It seems incredible now that anyone ever believed it. It has become a commonplace that preparedness either for peace or for war depends equally on industrial organization and conservation of national resources. Of all our national resources, human life is the most important. Public health nursing directly contributes toward the conservation of human life; this is the fact that I want chiefly to emphasize today.

I should hardly be speaking as I do, if the public health nurse's work were merely bedside nursing, or if it concerned itself merely with the welfare of sick persons, fundamental and necessary as such service is. This she does and will continue to do; but her most important function is not the cure but the prevention of sickness. Six years ago, Dr. Winslow

<sup>1</sup> Read at the twentieth annual convention of the American Nurses' Association, May 1, 1917.

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called the visiting nurse, "the most important figure in the modern movement for the protection of public health;" and since then her field of usefulness and her usefulness in her field have enormously expanded. Her contribution to the public safety is her preventive work.

It is hard to show by figures and diagrams the value of any preventive work. No one can say just how many cases of malnutrition nurses prevented last year by teaching mothers how to feed their children, or how many cases of cardiac disease they prevented by keeping the child with scarlet fever from infecting his brothers and sisters. The nurse is not the only health agent at work, and we do not wish, even if we could, to give her glory beyond her due. Some results can be measured, however, and in order to illustrate the kind of preventive work done by public health nurses, I should like to describe two studies recently published.

The first is a study, by Mr. Michael Davis, of prenatal care given during the years 1914 and 1915 to 731 pregnant women in five wards of Boston. This care included work done by prenatal clinics and medical attendants at delivery, so that the nurse, though essential, was not the only factor. Her work consisted of visits at ten-day intervals, persuading expectant mothers to attend a prenatal clinic, instructing mothers as to the hygiene of pregnancy and preparation for confinement, followed by nursing visits for about two weeks after delivery. Details of the experiment I will not go into; they are available in print. The important point is that the death rate among these babies where the mothers had prenatal care was reduced from one-half to one-third of that found among babies not receiving prenatal care in these same wards, during the same period. This reduction held for the first week, the first month and the first year of life. Not less striking is the fact that the proportion of still births was only one-half that of the general population.

We must face the fact that at no distant day men of our nation may be called upon to die, fighting for their country on land or on sea. Is it not then doubly worth while to save the lives of these babies?

General Baden-Powell, in the first annual report of the Canadian Patriotic Fund, has said:

The true victory will lie not so much in the actual tactical gain on the battlefield today as in the quality of the men who have to carry on the work of the country after the war. War kills off the best of a nation's manhood; therefore, extra care must be exercised to save every child, not for its own sake or for its parents' sake but for the sake of the nation. It has got to be saved from infant mortality, then from ill health, and finally from drifting into being waste human

material. We must economize our human material. Each individual must be made (1) healthy and strong, (2) endowed with character for becoming a valuable citizen for the state.

The other illustration that I should like to give you shows some results of the visiting nurse service of the Metropolitan Life Insurance Company. This company has over 10,000,000 industrial policy holders, and the study applies to the diseases causing nearly half the white mortality in 1911. After allowance had been made for all other factors known to the statisticians, the reduction in death benefits due to the nursing service and public health education was 12.8 per cent. That means, of course, saving the lives of nearly 13 per cent of this vast number of people. Reduction in the death rate always means reduction in sickness as well, so that improved health as well as the saving of life has been the result of the nursing service. Is not any saving of life, necessary as it is in time of peace, doubly necessary for a nation at war?

I hardly need to go back to the time when nurses began their work in public schools, and tell you how school nursing first made school medical inspection effective. Statistics are available to us all, showing results in remedying physical defects and controlling communicable diseases. I should like now to connect these well-known facts in your minds with a statement I saw recently, to the effect that in New York City, last summer, 75 per cent of the men who applied to enlist in the National Guard for service on the Mexican Border were rejected by the recruiting officers for physical disability. A large number of these rejections was due to heart lesions, kidney disease, and such disabilities as defective teeth, hearing and vision. If, as children, these men had received the treatment for their defective eyes and ears and teeth and tonsils that is given wherever effective health work is carried on in schools, if the germs of scarlet fever and measles and diphtheria that impaired their kidneys and hearts and hearing had been destroyed before reaching them, we may safely say that not only the spirit but the bodies of many of this 75 per cent would have been fit for service. Surely it is a grave situation when three-quarters of a large body of young men are unfit for active service.

In Great Britain after two years of war, a committee on health of munition workers said:

At the present time when war is destroying so much of its best manhood, the nation is under special obligation to secure that the rising generation grows up strong and hardy, both in body and character. It is necessary to guard not only against immediate breakdown, but also against the imposition of strains that may stunt future growth and development.

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This is no time to turn our attention away from the health needs of children. It is a time rather to redouble our efforts to increase the number of school nurses and infant welfare nurses, until adequate provision has been made to meet the health needs of every child in every state of the Union.

If European experience during this war has shown one thing more clearly than another, it has shown the part played by organization for national defense of all forms of labor and technical skill. Not only those in the firing line are giving full measure of patriotic service, but equally those who are keeping alive the fundamental industries, without which no army can continue the struggle, without which no modern nation can live.

Among the famous 100,000 that first went from England to the trenches in France were physicians, engineers, mechanics, and other skilled workers. The greater need of these men at home was demonstrated, in many cases too late. We have been warned to avoid such blunders. We shall doubtless make our own original blunders in our own original way; but specially trained workers should be very sure they are right before giving up necessary work that they and no others can do.

I should be sorry to give the impression that I consider public health nursing the only way, or necessarily the best way, for a nurse to serve, and I should be distressed to have any one think that I am urging against enrolling in the Red Cross, on whose National Committee on Nursing Service I have the honor to serve. This, I am far from either thinking or doing. I do, however, think that young graduates, fresh from their surgical experience are at least as good and probably better for Red Cross work than public health nurses whose hospital experience is necessarily more remote. On the other hand, the only person who can fill the place of a specially trained public health nurse is another specially trained public health nurse. If the time should come when public health nurses are more needed in the Red Cross than in their own communities, I do not need to tell you where we shall all be found; but our duty seems clear as long as equally or better qualified nurses are available.

The full horror of war we cannot realize now and perhaps we never shall. Yet we cannot blind ourselves to the fact that the threatened food shortage alone is cause for grave anxiety. Mr. Hames Storrow, chairman of Governor McCall's Committee on Public Safety, said recently:

We are seeing the greatest dearth of food the world has ever seen. Moreover, though we ourselves need food we are in duty bound to supply it to the

Allies with whom we have joined forces. We cannot sit at home feeding ourselves while they are out on the battlefield hungry. . . . Half the poultry raised in Massachusetts is being killed because of the lack of grain, and farmers in New England are killing their cows. In consequence there will be a shortage of eggs and milk.

He predicted that the nation's grain crop will be 60 per cent below normal. We know only too well what actual shortage of food will mean to the poor. The high cost of food now is serious enough. Utilizing to the best advantage whatever food there is will become increasingly important. "Every housewife," said Mr. Wilson, in his proclamation of April 15, "who practises strict economy puts herself in the ranks of those who serve the nation." Teaching women in their homes how to feed their families is one of the duties of tuberculosis nurses, infant welfare nurses, school nurses and all other public health nurses. The less food there is, the more is such teaching needed. In the interest of national efficiency it must not be curtailed.

The supply of nurses with special training for public health work is now entirely inadequate; in the future the need will be greatly increased. This is true in all forms of social work. We shall have more under-nourished children, more bottle-fed babies of mothers working away from home, more destitute families, more poverty, more sickness. To meet this as far as nurses can, we shall need greatly increased numbers of women trained for such work. To obtain these students is the most important problem of public health instructors today, and I want to make the strongest appeal I can to the profession as a whole to help in supplying this need. I want especially to appeal to superintendents of training schools to bring it to the attention of their pupils. The expense of a post-graduate course is an obstacle; but the question now is not whether we can afford to make ourselves as useful as possible to our country, but whether we can afford *not to*.

In closing, I want to say that I wish President Wilson had included women in his plan for the selective draft. In Europe, war has already shown the value of women's work for national defense. Very many women, I believe, would welcome an organization competent to direct them either to continue their regular work, or to assign them to other work where their particular experience and ability would ultimately be more effective. As no such demand has been made upon women, it remains for us, each for herself, to decide, soberly, unselfishly, patriotically, just where and how in the long run we can serve our country best. "The supreme test of the nation has come," said Mr. Wilson, "we must all speak, act, and serve together!"